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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted With Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	042513.025CIP
First Named Inventor	HUSTELL, Ronald
COMPLETE IF KNOWN	
Application Number	TBA/
Filing Date	Concurrent Herewith
Art Unit	TBA
Examiner Name	TBA

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

WATER PURIFICATION APPARATUS

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number		25461		OR		<input type="checkbox"/> Correspondence address below	
Name Dale Lischer									
Address Smith, Gambrell & Russell; Suite 3100, Promenade II; 1230 Peachtree Street									
City Atlanta				State GA			ZIP 30309-3592		
Country USA				Telephone 404-815-3741			Fax 404-684-7041		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Hustell					Family Name or Surname Ronald L.				
Inventor's Signature							Date		
Residence: City Lawrenceville				State Ga		Country USA		Citizenship USA	
Mailing Address 1865 Grouse Court									
City Lawrenceville				State GA		Zip 30044-6914		Country USA	
NAME OF SECOND INVENTOR:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) CRAIN					Family Name or Surname Jason M.				
Inventor's Signature							Date		
Residence: City Mobile				State AL		Country USA		Citizenship USA	
Mailing Address 2350 Carrington Court									
City Mobile				State AL		Zip 36695		Country USA	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.									

DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

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Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
CLARK			Stephen D.		
Inventor's Signature				Date	
Residence: City	Atlanta	State	Ga	Country	USA
Mailing Address		2340 Kimbrough Court			
Mailing Address					
City	Atlanta	State	GA	ZIP	30350
Country			USA		
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Inventor's Signature				Date	
Residence: City		State		Country	
Mailing Address					
Mailing Address					
City		State		Zip	
Country					
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Inventor's Signature				Date	
Residence: City		State		Country	
Mailing Address					
Mailing Address					
City		State		Zip	
Country					

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